

## REPORTING FOR FISHING TOURNAMENT

ON PUBLIC WATERS

State Form 52361 (R / 5-06)

Pursuant to 312 IAC 2-4

Instructions: Reports must be mailed within 30 days of tournament completion.

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Name of Applicant			Name of Organization								
Address											
City, State, ZIP C	ode										
Telephone Numbe	er (including are	ea cod	(e)		Fax Number (in	cluding area code	<u> </u>				
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Tournament Lake Tournament Date			Start time	End Time	Species Sought						
Tournament Laun	ch Location				Tournament Re	elease Location	1				
Number of Boats	Proposed	Num	ber of Boat	ts Present	Actual Number	Actual Number of Anglers  Type of event  Team  I		Individ	Individual		
Team/Angler	Number	١	Neight	Team/Angler	Number	Weight	Team/Angler		mber	Wei	ght
1				26			51				_
2				27			52				
3				28			53				
4				29			54				
5				30			55				
6				31			56				
7				32			57				
8				33			58				
9				34			59				
10				35			60				
11				36			61				
12				37			62				
13				38			63				
14				39			64				
15				40			65				
16				41			66				
17				42			67				
18				43			68				
19				44			69				
20				45			70				
21				46			71				
22				47			72				
23				48			73				
24				49			74				
25				50			75				
Signature _						Date					

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Team/Angler	Number	Weight	Team/Angler	Number	Weight	Team/Angler	Number	Weight
76			116			156		
77			117			157		
78			118			158		
79			119			159		
80			120			160		
81			121			161		
82			122			162		
83			123			163		
84			124			164		
85			125			165		
86			126			166		
87			127			167		
88			128			168		
89			129			169		
90			130			170		
91			131			171		
92			132			172		
93			133			173		
94			134			174		
95			135			175		
96			136			176		
97			137			177		
98			138			178		
99			139			179		
100			140			180		
101			141			181		
102			142			182		
103			143			183		
104			144			184		
105			145			185		
106			146			186		
107			147			187		
108			148			188		
109			149			189		
110			150			190		
111			151			191		
112			152			192		
113			153			193		
114			154			194		
115			155			195		

Date	Signature
Date	Signature

## **LENGTH FREQUENCY**

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Date	Name of Organization	
Number of Anglers	Number of Boats	
Start Time	End Time	
	•	
Instructions: Measure fis	sh from tip of snout to tips of tail to the nearest	1/2 inch
14		

14	
14.5	
15	
15.5	
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16.5	
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17.5	
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18.5	
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22.5	
23	
23.5	
24	
24.5	
25	

SPECIES SOUGHT:	
TOTAL WEIGHT:	
WINNING WEIGHT:	
BIG FISH WEIGHT:	
TOTAL NUMBER OF FISH WEIGHED IN:	

Please send form back to: Department of Natural Resources

Division of Fish and Wildlife / 1353 South Governors Drive / Columbia City, IN 46725-753

Phone: (260) 244-3720